-	OUVERING ION FORM PI (U-0/2										1 09/262 143		
CLAIMS AS FILED - PART I								CAIAI	ENTITY	OR		RTIWN	
}	(Cotymn 1) (Cotymn 2)						7 1	SMAL	CHILIT	٠ ٦	SWALI	LENTITY	
<u>.</u>	ron SIC FEE	HEU!	MULBERTEED		MUMBER EXTRA]	RATE	fee	j	_ RATE	FEE	
(2)	(3) CFR 1.10(e))								1	OK.		1	
	TAL CLAIMS CFR 1.16(c))		onthree 20 4							1		┤╩┈	
CHE	DEPERMENT CLA	mus -					┨╏	k 1	┥	, O"	<u> </u>	- 	
(3)	CE (1 1.10(v))	l	erpent) (<u> </u>		11	A 1	J	. 000	# 1·		
M	MULTIPLE DEPENDENT CLAIM PRESENT DI CER 1 1660							11		CHI	41		
. 4	" If the difference in column I is loss than zero, enter "O" in column ?							IATAL		Oir	1014		
	c	LAIMS AS A	MENDE	D - PA	RTII								
	15/16 (Cohumn 1) (Cohumn 2) (Cohumn 3)						264611	ENTITY	CHC	OTHER THAN			
7		CLAMS	7		SHEST	T	l L	Jimacc	T	1	SWALL	ENTITY	
_	•	REMAINING AFTER AMENDMENT	.	PRE	IMBER VIOUSLY ID FOR	PRESENT		HATE	ADDI- TIONAL		RATE	ADDI	
AMENDMENT	Total (1) Cru v skrig	20	Minus		20	- <u>-</u> -	1	1,25.	, FEE		50	· FEE	
EZ	independent . (1) C/R + scop	· 4.	Minus	16	11	1	 -	1 /00 ·		OH	., 200	_	
Ž	FIRST PRESCRIATION OF MULTIPLE DEPENDENT CLAM (SECTRE)					{	. 1700.	·	Or	11.20	 		
			TE DEFEN	00m Q.	AM (31 C)	TR I SECON	, .	* 1 *	<u> </u>	OIL	41,		
								IOTAL ADD'L FEE	ئـــــا	OIK	TOTAL ADDITEL .	L	
,		(Column 1)		(Co	dumn 7)	(Column)}	•						
∞	4-21-01	CLANS REMAINING	1		MEST MBER	PRESENT	П	RATE	ADDI:		RATE	ADDI	
Z	. '	AFTER AMENDIACIO			OUSLY	EXTRA			TIONAL FEE		100.0	110146;	
Ž	Total ()) ((m i isky)	14	Minus	7	$\overline{\Lambda}$	· 18	-					166	
AMENOMENT B	Independent ()7 (/ 0 + 160)	· //	Minus	 	Υ	7/1	F	1 1		Ok	A 11		
š۲		-7		<u> </u>	I	$-\mathcal{V}$	Ŀ	1		OR	·· 1 '		
	T THIS I PRESENTATION OF WILL DEPENDENT COM IN CIR ! HO!!							\$		Or.	* 1 .		
								OTAL DO'L FEE		Çıl	TOTAL SADDLEEL	-	
		(Cetonia 1)		(Cot	iwo 51	(Column);				•	•		
5		CLAIMS		HIGH		TRESCRI	Г	RATE	ADDL		a		
\overline{z}	1	AFTER AMERIDASERT	ļ.	LUEAN	OUSLY	CARA		RAIL:	TIORAL		RAIG	ADDI TIONAL CEE	
י ייייי	lear message		Lienus				1.	, ,	700	OF.	* 1	166	
	131 E1# + 14(0#	•	Aimus	•••		-	1		. 1	OE.	. 1		
٤,	FIRST PRESENTATION OF MULTIPLE DEPENDENT QUIM (3) CFR 1 1601						-			Ot:		•	
			•				10	TAL			1014		
	line entry in colu					***		שוופנ [CHE	∍öörıcı		

the Highest Number the county hard for HI THIS SHACE is less than 3, enter 3

The Highest Number Previously Paid for IN THIS SPACE is less than 3, enter?

The Highest Number Previously Paid for IN THIS SPACE is less than 3, enter?

The Highest Number Previously Paid for IN THIS SPACE is less than 3, enter?

The Highest Number Previously Paid for IN THIS selected its the following the selected in the patholic method to the patholic transport of the patholic method is extended in the patholic transport of the

they common assessment of the completing the form, call 1,800-PTO-9189, and select option 2

09,262743